Case 1:05-cv-00739-SLR

Document 103

103 Filed 05/15/2007 Page 1 of 1 **PROCESS RECEIPT AND RETURN**

U.S. Department of Justice United States Marshals Service

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF	COURT CASE NUMBER	
PLAINTIF (DT IS M (all TAT S	05-739-C-1-4)~
DEFENDANT	TYPE OF PROCESS	
ATTORNEY GENERAL DEL	0.5	_
SERVE NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR	DESCRIPTION OF PROPERTY TO SEIZE OR CONDEM!	N
	ORNIET DENERAL	_
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	chist-wilmination	
M DELAWARE 138012		_
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:	Number of process to be	
Carries M. Conhans	served with this Form - 285	_
	Number of parties to be	
SMIRHA DELAWARK	served in this case	
100000000000000000000000000000000000000	Check for service	
	on U.S.A.	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING	SERVICE (Include Business and Alternate Addresses, All	Ī
Telephone Numbers, and Estimated Times Available For Service):	Fo	old
PAUPER'CASE'	MAY 4 E 2007	
	MAY 1 5 2007	
I I I I I I I I I I I I I I I I I I I	U.S. DISTRICT COURT	
	DISTRICT OF COLAMARE	
		_
Signature of Attorney or other Originator requesting service on behalf of: PLAINTIFF	TELEPHONE NUMBER DATE	_
DEFENDANT	NIOA 4-05.0"	1
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO	NOT WRITE BELOW THIS LINE	200 0 € 2
I acknowledge receipt for the total Total Process District District Signature of Author	ized USMS Deputy or Clerk Date	-
number of process indicated. (Sign only first USM 285 if more		<u> </u>
than one USM 285 is submitted) No		<i>o /</i> =
I hereby certify and return that I have personally served, \(\simega\) have legal evidence of service, \(\simega\) have ex	ecuted as shown in "Remarks", the process described	
on the individual, company, corporation, etc., at the address shown above or on the individual, company	, corporation, etc., shown at the address inserted below.	
☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc.	, named above (See remarks below)	
Name and title of individual served (if not shown above)	A person of suitable age and dis-	_
KEKIH BRADY STATE SOLVETOR	cretion then residing in the defendant's usual place of abode.	; `
Address (complete only if different than shown above)	Date of Service Time	m
	5-11-D7 0400 B	m
	Signature of U.S. Marshal or Deputy	- ,
	Memor	لـــ
Service Fee Total Milcage Charges Forwarding Fee Total Charges Advance Deposits	Amount owed to U.S. Marshal or Amount of Refund	_
	Amount owed to 6.5. Marshar of	
(including endeavors)	Alloun of Reising	
REMARKS: (including endeavors)	Allount of Refuta	